Application or Docket Number

Effective October 1, 2000 95 60 - 007-3													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			29				R.	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			7 4 minus 20=		G		X	X\$ 9= 81		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		· '		X	40=	21	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=			OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, enter	r "0" in c	'0" in column 2		TOTAL 436		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) (Column 3)							SN	ALL I	ENTITY	OR	SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FÆE		RATE	ADDI- TIONAL FEE	
	Total	. 29	Minus		29	=	X	9=		OR	X\$18=		
	Independent	· 3 NTATION OF MI	Minus	ENDENT	CLAIM	=	X	49=		OR	X80=		
	FINOT FRESE	TIATION OF MI	JUITLE DEF	CIAOCIA	CLAIN		1	35=		OR	+270=		
	11/22/04.							TOTAL T. FEE		OR	TOTAL ADDIT, FEE		
	10 = 1	(Column 1)			mn 2)	(Column 3)				•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT B	<u> </u>	CLAIMS REMAINING AFTER AMENDMENT		NUM	REST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		. RATE	ADDI- TIONAL FEE	
	Total	. 29	Minus	2	19_	=	X:	§ 9=		OR	X\$18=		
	Independent	· 3	Minus	···	3	=-	X	40=		OR	X80=		
_	THOTTRESE	ALVEROIS OF MA	OCTIFEE DEF	LINDEN	CEANV		+1	35=		OR	+270=		
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT C	an establica	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	XS	S 9=		OR	XS18=		
	Independent	•	Minus	•••		=	Υ.	10=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3										OR	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		her Previously Pa					found in	the app	propriate box	in co	lumo 1.	l	